PART B - FEE(S) TRANSMITTAL

d send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	en perow or enteried on	for transmitting the ISS og the Patent, advance of the Patent, advance of the Patent, advance of the Patent I, by (UE FEE and PUBLICAT riders and notification of r a) specifying a new corres	ON FEE (if requinaintenance fees w pondence address;	red). Block ill be maile and/or (b)	s 1 through 5 shed to the current indicating a separate	could be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
28995	1127						
RALPH E. JOCKE				Certificate of Mailing or Transmission I bereby certify that this Fee(s) Transmittal is being deposited with the United			
Walker & Jocke 231 SOUTH BROADWAY				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FEE address above, or being fassimile transmitted to the USPIO (571) 273-2885, on the date indicated below.			
MEDINA, OH 4	14256					(Depositor's mane)	
			<u> </u> -	 			(Signature)
			<u> </u>		-		(Duta)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/620,911	07/15/2003	Donald McCoy D-1171 R 8962				8962	
TITLE OF INVENTION: AUTOMATED BANKING MACHINE BOOTABLE MEDIA AUTHENTICATION							
					0		•
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	11/04/2010
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
TRAN, HAI 3694			705-043000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent strongers 1 Christopher L. Parmelee							
Change of correspondence address (or Change of Correspondence			or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Ralph E, Jocke 3 Walker & Jocke				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							& Jocke
3. ASSIGNEE NAME AND RESIDENCE DATA, TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIG	(B) RESIDENCE: (CITY	ESIDENCE: (CITY and STATE OR COUNTRY)					
	Service Systen	North Canton, Ohio					
division of Diebold, Incorporated Please check the appropriate assignce category or categories (will not be printed on the patent):							
Please check the appropri	iate assignee category or	categories (will not be pr	inted on the patent):	Individual Co	poration or	other private grou	p eatity Government
4a. The following fee(s)	are submitted:	p. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)					
lasue Fee	o small entity discount p	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
Advance Order -	of Copies 11	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number09_0428_ (enclose an extra copy of this form).					
			overpayment, to Depor	it Account Number	_09-04	28_ (enclose an	extra copy of this form).
 Change in Entity Stat a. Applicant claims 	t us (from status indicate c s SMALL ENTTTY statu		b. Applicant is no long	er claiming SMALI	LENTITY	status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	ired) will not be accepted	from anyone other than the Office.				
Authorized Signature			Date_11/1/2010				
Typed or printed name Ralph Locke			Registration No. 31.029				
This collection of informan application. Confident submitting the completed this form and/or suggestion 1450, Alexandria, V.	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bur inginia 22313-1450. DO	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (on is required to obtain or re 1.14. This collection is esti depending upon the indivi- c Chief Information Office COMPLETED FORMS TO	tain a benefit by the mated to take 12 m dual case. Any con , U.S. Patent and T THIS ADDRESS.	e public who inutes to co aments on to rademark O SEND TO:	ich is to file (and implete, including he amount of tim office, U.S. Depar Commissioner fo	by the USPTO to process) gathering, preparing, and a you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,

Alexandria, Virginia 22313-1450.

Alexandria, Virginia 22313-1430.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a waited DMB control number 1994.26.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

01 FC:1501 1510.00 DA
U.S. Patent 62d in Califolite Office; U.S. 3314334 EPIT OF COMMERCE